

**City of Troy
City Clerk's Office
500 West Big Beaver
Troy, Michigan 48084
(248) 524-3331**



(Send Application & Remittance to Above Address)

APPLICATION FOR SMOKING LOUNGE LICENSE

(For Businesses with Smoking Lounge Revenue Greater
than 35% of Gross Revenue, or Greater than 35% of Advertising
Expenditures Dedicated to Advertising Smoking at the Establishment)

Date _____

New _____ Renewal _____

Business Name _____

Address _____ Troy, MI Zip _____

Business Type _____ Zoning District _____

Manager/Operator _____ Date of Birth _____

Home Address _____ Home Phone _____

City/State/Zip _____ Length of Residence in Michigan _____

Experience in Operating a Smoking Lounge:

Have you ever been convicted of a crime? _____ If yes, state when and where _____

Past Employment Experience:

I hereby certify that the above statements are true _____

Applicant's Signature

SEE REVERSE SIDE OF THIS FORM FOR ADDITIONAL INSTRUCTIONS

ATTACHMENTS:

- 1 A **SCALE** drawing of the premise on which the business will be conducted, showing uses of proposed space including: exit, public restroom, drinking fountain, useable floor area, and area dedicated to smoking
- 2 Most recent Financial Statement showing gross revenue, smoking lounge revenue, and advertising expenditures

PARTNERSHIP/CORPORATION APPLICATION INSTRUCTIONS:

If the applicant is a partnership, each active partner shall join in the application for the license, and shall furnish the information and recommendations required of an individual applicant.

If the applicant is a corporation authorized to do business in this State, the agent of the corporation who will have principal charge of the premises established shall make the application, and the application shall contain all of the facts and recommendations required in the case of an individual. The license issued to a corporation is revocable upon a change in the agent managing the premise, and a new license may be required by the City Council of the City of Troy before a new agent may take charge of the premise.

If the applicant is a limited liability company, the name and address of each member, manager and assignee of a membership interest shall be listed, and the articles of organization shall be attached to the application.

DATE ROUTED TO DEPARTMENTS FOR INSPECTIONS _____

Department	Approved	Disapproved	Signature	Date
Police				
Fire				
Building				

Date Licensed Issued by City Clerk's Office _____

<u>Fees pursuant to Chapter 60 of the City of Troy Code of Ordinances:</u>
Application Fee: \$100.00